24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
The 2016 Committee	
	C C00569905
Check if 24-hour report X 48-hour report New report Amends report filed	on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
A1 VAN AD ITEMS	M M / D D / Y Y Y Y
Mailing Address 3290 VAN DRIVE	06 25 2015 Amount
City State Zip Code	1600.00
BURLINGTON NC 27215-9000	Transaction ID : SE24.222 Date of Disbursement or Obligation
Purpose of Expenditure T-SHIRTS AND STICKERS Category/ Type 004	06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
DR. BEN CARSON Oppose	President Senate State:
Calendar Year-To-Date Disbu	ursement For: X Primary General
Per Election for Office Sought 998872.67 2016	
Full Name of Payee THE APPLEBOX GROUP LLC	Date of Public Distribution/Dissemination
Mailing Address 48 KINGSWOOD DR	06 25 2015
48 KINGSWOOD DR	Amount
City State Zip Code	1284.00
BETHEL CT 06801-1840	Transaction ID : SE24.174
Purpose of Evpenditure	Date of Disbursement or Obligation
VIDEO PRODUCTION Category/ Type O04	06 25 / 2015
Name of Federal Candidate Support Office	e Sought: House District:
DR. BEN CARSON Oppose	President Senate State:
	ursement For: X Primary General
Per Election for Office Sought 1000156.67 2016	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2884.00
	77 77 77
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Robert Frank [Electronically Filed] Date	01 06 2016
Signature	